



St. Francis Xavier High School

HOCKEY HIGH PERFORMANCE ACADEMY

☐ Girls

☐ Boys

Full Year - \$4500

Sports Academy Program Contract

2022-2023

Student Name: _____ Grade: _____

Current School: _____

Terms of Agreement:

1. Acceptance into the Hockey High Performance Academy will not be confirmed until the deposit of **\$2,250** or full payment is remitted with my child’s registration. **At the time of registration, student must provide 2 character reference letters.** Deposit is due on April 8, 2022 or upon the signing of the contract if after April 8, 2022.

I acknowledge the deposit is **NON REFUNDABLE** after May 27, 2022 _____ Initial

2. PROGRAM FEE PAYMENT OPTIONS (\$2250):

- Sign up with payment plan on PowerSchool _____
(Payments accepted are: online banking and credit card)
- Payments made at the Bookstore _____
(Payments accepted are: cash, credit card, debit)

3. I agree that it is my responsibility to ensure timely payments. If I default in meeting any of the payments, I understand that my child may be suspended from the program and equipment/clothing may be withheld. If any circumstances occur which may change my ability to meet the payment requirements, I agree to immediately contact the Business Office at St. Francis Xavier High School (780-489-2571) to make alternate arrangements.

4. **Players will be determined by Academy Director & staff for high performance placement.** Due to the limited number of spaces, our not-for-profit fee structure and fairness to all students in the academy, once accepted, parents are responsible for the entire Academy fee.

I acknowledge that once accepted into the Academy, there will be no refunds or prorates of the Academy Fee. _____ Initial
This includes but is not limited to those players that are required to move due to being called up, those that sustain injuries or those that transfer schools.

PROGRAM PAYMENT SCHEDULE			
Installment - 1	Oct 1	\$750.00	
Installment - 2	Nov 1	\$750.00	
Installment - 3	Dec 1	\$750.00	

Parent Information (Please Print):

Parent Name:

Contact Phone Numbers: (Cell)Email Address:

I have read and agree to these Terms of Agreement. _____ Initial

_____Date

Signature of Parent/Guardian